

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	YH	TS331	03-25-99
O.I.P.E. CLASSIFIER		25	4189
FORMALITY REVIEW		64724	

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10-5-99
2	✓	✓	3/29/00
3	✓	✓	11/1/00
4	✓	✓	7/19/01
5	✓	✓	3/25/02
6	✓	✓	12/16/02
7	✓	✓	8/24/03
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here